

**UNITED STATES
SECURITIES AND EXCHANGE COMMISSION**

Washington, DC 20549

FORM 8-K

**Current Report Pursuant
to Section 13 or 15(d) of the
Securities Exchange Act of 1934**

Date of Report (Date of earliest event Reported): **August 1, 2018**

THERAVANCE BIOPHARMA, INC.

(Exact Name of Registrant as Specified in its Charter)

Cayman Islands

(State or Other Jurisdiction of
Incorporation)

001-36033

(Commission File Number)

98-122628

(I.R.S. Employer Identification Number)

PO Box 309

Ugland House, South Church Street

George Town, Grand Cayman, Cayman Islands KY1-1104

(650) 808-6000

(Addresses, including zip code, and telephone numbers, including area code, of principal executive offices)

Check the appropriate box below if the Form 8-K filing is intended to simultaneously satisfy the filing obligation of the registrant under any of the following provisions (see General Instruction A.2. below):

- Written communications pursuant to Rule 425 under the Securities Act (17 CFR 230.425)
- Soliciting material pursuant to Rule 14a-12 under the Exchange Act (17 CFR 240.14a-12)
- Pre-commencement communications pursuant to Rule 14d-2(b) under the Exchange Act (17 CFR 240.14d-2(b))
- Pre-commencement communications pursuant to Rule 13e-4(c) under the Exchange Act (17 CFR 240.13e-4(c))

Indicate by check mark whether the registrant is an emerging growth company as defined in Rule 405 of the Securities Act of 1933 (§230.405 of this chapter) or Rule 12b-2 of the Securities Exchange Act of 1934 (§240.12b-2 of this chapter).

Emerging growth company

If an emerging growth company, indicate by check mark if the registrant has elected not to use the extended transition period for complying with any new or revised financial accounting standards provided pursuant to Section 13(a) of the Exchange Act.

Item 2.02. Results of Operations and Financial Condition.

On August 1, 2018, Theravance Biopharma, Inc. issued a press release and is holding a conference call regarding its financial results for the quarter ended June 30, 2018 and a business update. A copy of the press release is furnished as Exhibit 99.1 to this Current Report and a copy of materials that will accompany the call is furnished as Exhibit 99.2 to this Current Report.

The information in Item 2.02 and in Item 9.01 of this Current Report on Form 8-K, including Exhibits 99.1 and 99.2, is being furnished and shall not be deemed "filed" for the purposes of Section 18 of the Securities Exchange Act of 1934, as amended (the "Securities Exchange Act of 1934"), or otherwise subject to the liabilities of that Section, nor shall it be incorporated by reference in any filing under the Securities Act of 1933, as amended, or the Securities Exchange Act of 1934, except as expressly set forth by specific reference in such a filing.

Item 8.01 Other Events.

On August 1, 2018, the Company issued a press release announcing positive top-line four-week results from a Phase 2 clinical trial of TD-9855, an investigational, once-daily norepinephrine and serotonin reuptake inhibitor (NSRI) in development for the treatment of patients with symptomatic neurogenic orthostatic hypotension (nOH). A copy of the press release is furnished as Exhibit 99.3 hereto and incorporated by reference into this Current Report on Form 8-K.

The information in Item 8.01 and in Exhibit 99.3 of this Current Report on Form 8-K is being furnished and shall not be deemed "filed" for the purposes of Section 18 of the Securities Exchange Act of 1934, or otherwise subject to the liabilities of that Section, nor shall it be incorporated by reference in any filing under the Securities Act of 1933, as amended, or the Securities Exchange Act of 1934, except as expressly set forth by specific reference in such a filing.

Item 9.01. Financial Statements and Exhibits.

(d) Exhibits.

- 99.1 Press Release dated August 1, 2018
- 99.2 Slide deck entitled 2Q 2018 Financial Results and Business Update dated August 1, 2018
- 99.3 Press Release Dated August 1, 2018 (Reporting Positive Top-Line Four-Week Data from Phase 2 Trial of TD-9855 for the Treatment of Symptomatic Neurogenic Orthostatic Hypotension)

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EXHIBIT INDEX

Exhibit No.	Description
99.1	Press Release dated August 1, 2018
99.2	Slide deck entitled 2Q 2018 Financial Results and Business Update dated August 1, 2018
99.3	Press Release Dated August 1, 2018 (Reporting Positive Top-Line Four-Week Data from Phase 2 Trial of TD-9855 for the Treatment of Symptomatic Neurogenic Orthostatic Hypotension)

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SIGNATURE

Pursuant to the requirements of the Securities Exchange Act of 1934, the registrant has duly caused this report to be signed on its behalf by the undersigned hereunto duly authorized.

THERAVANCE BIOPHARMA, INC.

Date: August 1, 2018

By: /s/ Renee D. Gala
Renee D. Gala
Senior Vice President and Chief Financial Officer

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Theravance Biopharma, Inc. Reports Second Quarter 2018 Financial Results and Provides Business Update

TD-1473 Advancing into Phase 2b/3 Study in Ulcerative Colitis in Fourth Quarter Following Completion of Phase 1b Study and Successful Dialogues with FDA and EMA

TD-1473 Advancing into Phase 2 Study in Crohn's Disease in Third Quarter

TD-9855 Advancing into Phase 3 Program in nOH in Late 2018 or Early 2019 Following Positive Data from Phase 2 Study and Successful Dialogue with FDA

DUBLIN, IRELAND — AUGUST 1, 2018 — Theravance Biopharma, Inc. (“Theravance Biopharma” or the “Company”) (NASDAQ: TBPH) today reported financial results for the second quarter ended June 30, 2018. Revenue for the second quarter of 2018 was \$23.5 million. The Company’s second quarter operating loss was \$48.7 million or \$34.8 million excluding share-based compensation expense. Cash, cash equivalents, and marketable securities totaled \$371.2 million as of June 30, 2018.

Rick E Winningham, Chairman and Chief Executive Officer, commented: “We have made exciting progress across our portfolio. Positive data from the TD-1473 Phase 1b study in ulcerative colitis and TD-9855 Phase 2 study in nOH provide strong clinical rationale for the progression into registrational programs, and with regulatory dialogues recently completed, each program now has a clear path into late-stage studies. For YUPELRI™, our brand name for reafenacin, we and our partner Mylan are finalizing launch readiness activities in anticipation of a potential FDA approval later this year. In our early stage pipeline, we are preparing to advance TD-8236, our novel inhaled JAK inhibitor for serious respiratory diseases, into the clinic. These recent pipeline advancements along with a strong balance sheet and emerging cash flows from Trelegy Ellipta position us to continue to deliver growth across our business — from research to commercial — to drive value for shareholders and maximize the impact we can make on patients’ lives.”

Program Updates and Upcoming Milestones

TD-1473 (intestinally restricted pan-Janus kinase (JAK) inhibitor):

- Phase 1b study in 40 patients with ulcerative colitis complete; results demonstrate localized biologic activity and minimal systemic exposure, with a favorable safety and tolerability profile
 - Rates of clinical response were higher on all active doses (20, 80, 270 mg) compared with placebo using both partial and total Mayo definitions, with greatest effect seen at the 270 mg dose
 - Rectal bleeding scores improved above placebo at the 80 and 270 mg doses
 - Endoscopic improvements and mucosal healing were reported in all active arms, none in placebo arm
 - Plasma pharmacokinetic (PK) levels were low and consistent with data from healthy volunteers; local GI tissue PK levels above JAK inhibitory concentrations (IC50) for 80 and 270 mg dose
 - TD-1473 was generally well tolerated at all doses
 - Company and partner Janssen Biotech, Inc. plan to present full results from the Phase 1b study at a future medical meeting
- Initiation of Phase 2 induction study in Crohn’s disease planned in third quarter of 2018

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- Initiation of Phase 2b/3 induction and maintenance study in ulcerative colitis planned in fourth quarter of 2018, following completion of the Phase 1b study and successful dialogues with U.S. Food and Drug Administration (FDA) and European Medicines Authority (EMA)

TD-9855 (norepinephrine serotonin reuptake inhibitor (NSRI)):

- Positive data from the Phase 2 study in patients with neurogenic orthostatic hypotension (nOH), as detailed in a separate press release this morning. The Phase 2 trial was designed to evaluate the effect of TD-9855 in improving key symptoms and blood pressure
 - 27 of 34 (79%) patients who were enrolled in the single-ascending portion of the study demonstrated an improvement in blood pressure or standing time.
 - A statistically significant difference of 30 mm Hg ($p = 0.011$) was observed in systolic blood pressure between active ($n=5$) and placebo ($n=5$) at the four-hour time point post-dose in the single dose placebo-controlled portion of the study. These patients had a lower than normal mean SBP at baseline, consistent with nOH
 - Of the 21 patients who started the repeat-dose portion of the study, 16 (76%) remained on therapy after four weeks
 - Durable improvements in nOH symptom severity were observed as measured by OHSA Question #1 (a measure of dizziness, light-headedness or the sensation of being about to black out): the improvement was 2.4 points at the four-week time point(1)
 - 13 of the 16 patients who completed four weeks of dosing entered the trial with OHSA #1 of ≥ 4 (a threshold that will be applied in the registrational studies), and these patients reported a mean OHSA #1 reduction of 3.8 points at four weeks
 - Consistent increases in systolic blood pressure (SBP), including clinically meaningful improvements in standing SBP (7 mm Hg or greater) after standing for three minutes at all assessment time points and at all weekly visits over four weeks
 - TD-9855 was generally well tolerated, with no new safety findings attributable to drug observed in the study
- Initiation of a registrational Phase 3 program in nOH planned in late 2018 or early 2019 following positive data from the Phase 2 study and successful dialogue with FDA
- Presentation of preclinical TD-9855 findings at the Movement Disorders Congress in October

YUPELRI™ (revefenacin, TD-4208, nebulized long-acting muscarinic antagonist (LAMA)):

- Prescription Drug User Fee Act (PDUFA) date remains on track as November 13, 2018
- Oral presentation of the effect of revefenacin on reducing exacerbation rates in chronic obstructive pulmonary disease (COPD) based on the Phase 3 clinical program at European Respiratory Society (ERS) Paris 2018 International Congress in September

Trelegy Ellipta (first once-daily single inhaler triple therapy for COPD)(2):

- GSK reported second quarter 2018 net sales of \$36.5 million; Theravance Biopharma entitled to approximately 5.5% to 8.5% (tiered) of worldwide net sales of the product
- In April, FDA approved an expanded indication of Trelegy Ellipta for treatment of a broader population of COPD patients with airflow limitation or who have experienced an acute worsening of respiratory symptoms; boxed warning removed from Trelegy Ellipta prescribing information

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- Regulatory application recently submitted to Japanese Ministry of Health, Labor and Welfare (MHLW) for the treatment of adults with chronic COPD
 - Potential label expansion in EU and regulatory approval in Japan expected; completion of Phase 3 CAPTAIN study in asthma patients anticipated in early 2019

TD-8236 (novel inhaled JAK inhibitor for serious respiratory diseases):

- Progression into first-in-human studies in late 2018, leveraging expertise in respiratory diseases and JAK inhibition
 - Multiple JAK-dependent pathways clinically validated in asthma and COPD
 - Potentially broad activity with JAK inhibition across a range of respiratory indications and phenotypes

2018 R&D Day

- Planned in December to focus on Theravance Biopharma research and next programs potentially progressing into clinic

Notes:

(1)OHSA (Orthostatic Hypotension Symptom Assessment) is a validated scale assessing the presence of a range of symptoms in patients with nOH including dizziness, weakness, problems with vision, fatigue, trouble concentrating and head/neck discomfort

(2) As reported by Glaxo Group Limited or one of its affiliates (GSK); reported sales converted to USD; economic interest related to Trelegy Ellipta (the combination of fluticasone furoate, umeclidinium, and vilanterol, (FF/UMEC/VI), jointly developed by GSK and Innoviva, Inc.) entitles Company to upward tiering payments equal to approximately 5.5% to 8.5% on worldwide net sales of the product

Second Quarter Financial Results

Revenue

Revenue for the second quarter of 2018 was \$23.5 million, comprised of revenue from collaborative arrangements of \$18.1 million and product sales of VIBATIV® of \$5.4 million. Revenue in the second quarter represents an increase of approximately \$20.0 million over the same period in 2017. The increase is primarily related to revenue recognized from both the opt-in payment received from Alfasigma for velusetrag and the upfront payment associated with the global collaboration agreement with Janssen for TD-1473. The upfront payment from Janssen is expected to be recognized over the course of the Phase 2 program.

Research and Development (R&D) Expenses

R&D expenses for the second quarter of 2018 were \$48.6 million, compared to \$42.9 million in the same period in 2017. The increase is primarily due to higher share-based compensation, external-related expenses, and other allocated expenses. Second quarter R&D expenses include non-cash share-based compensation of \$6.9 million.

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Selling, General and Administrative (SG&A) Expenses

SG&A expenses for the second quarter of 2018 were \$25.0 million, compared to \$24.3 million in the same period in 2017. Second quarter SG&A expenses include non-cash share-based compensation of \$7.0 million.

Cash, Cash Equivalents and Marketable Securities

Cash, cash equivalents and marketable securities, excluding restricted cash, totaled \$371.2 million as of June 30, 2018.

2018 Financial Guidance

The Company's guidance on operating loss excluding non-cash share-based compensation for the full year of 2018 remains unchanged at \$180.0 to \$200.0 million. The actual amount could be above or below this forecast as a result of a variety of factors impacting the business. The Company's financial guidance

for 2018 does not include income related to Trelegy Ellipta.

Conference Call and Live Webcast Today at 8:00 am ET

Theravance Biopharma will hold a conference call and live webcast accompanied by slides today at 8:00 am ET. To participate in the live call by telephone, please dial (855) 296-9648 from the US, or (920) 663-6266 for international callers, and use the confirmation code 8316649. Those interested in listening to the conference call live via the internet may do so by visiting Theravance Biopharma's website at www.theravance.com, under the Investor Relations section, Presentations and Events. Please go to the website 15 minutes prior to the start of the call to register, download, and install any necessary audio software.

A replay of the conference call will be available on Theravance Biopharma's website for 30 days through August 31, 2018. An audio replay will also be available through 8:00 pm ET on August 8, 2018 by dialing (855) 859-2056 from the U.S., or (404) 537-3406 for international callers, and then entering confirmation code 8316649.

About Theravance Biopharma

Theravance Biopharma, Inc. ("Theravance Biopharma") is a diversified biopharmaceutical company with the core purpose of creating medicines that help improve the lives of patients suffering from serious illness.

In our relentless pursuit of this objective, we strive to apply insight and innovation at each stage of our business, including research, development and commercialization, and utilize both internal capabilities and those of partners around the world. Our research efforts are focused in the areas of inflammation and immunology. Our research goal is to design localized medicines that target diseased tissues, without systemic exposure, in order to maximize patient benefit and minimize risk. These efforts leverage years of experience in developing localized medicines for the lungs to treat respiratory disease. The first potential medicine to emerge from our research focus on immunology and localized treatments is an oral, intestinally restricted pan-Janus kinase (JAK) inhibitor, currently in development to treat a range of inflammatory intestinal diseases. Our pipeline of internally discovered product candidates will continue to evolve with the goal of creating transformational medicines to address the significant needs of patients.

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In addition, we have an economic interest in future payments that may be made by Glaxo Group or one of its affiliates (GSK) pursuant to its agreements with Innoviva, Inc. relating to certain programs, including Trelegy Ellipta.

For more information, please visit www.theravance.com.

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This press release contains and the conference call will contain certain "forward-looking" statements as that term is defined in the Private Securities Litigation Reform Act of 1995 regarding, among other things, statements relating to goals, plans, objectives, expectations and future events. Theravance Biopharma intends such forward-looking statements to be covered by the safe harbor provisions for forward-looking statements contained in Section 21E of the Securities Exchange Act of 1934 and the Private Securities Litigation Reform Act of 1995. Examples of such statements include statements relating to: the Company's strategies, plans and objectives, the Company's regulatory strategies and timing of clinical studies (including the data therefrom), the potential characteristics, benefits and mechanisms of action of the Company's product and product candidates, the Company's expectations for product candidates through development, potential regulatory approval and commercialization (including their potential as components of combination therapies and their differentiation from other products or potential products), product sales and the Company's expectations for its 2018 operating loss, excluding share-based compensation. These statements are based on the current estimates and assumptions of the management of Theravance Biopharma as of the date of the press release and the conference call and are subject to risks, uncertainties, changes in circumstances, assumptions and other factors that may cause the actual results of Theravance Biopharma to be materially different from those reflected in the forward-looking statements. Important factors that could cause actual results to differ materially from those indicated by such forward-looking statements include, among others, risks related to: delays or difficulties in commencing, enrolling or completing clinical studies, the potential that results from clinical or non-clinical studies indicate the Company's product candidates are unsafe or ineffective (including when our product candidates are studied in combination with other compounds), risks that product candidates do not obtain approval from regulatory authorities, the feasibility of undertaking future clinical trials for our product candidates based on policies and feedback from regulatory authorities, dependence on third parties to conduct clinical studies, delays or failure to achieve and maintain regulatory approvals for product candidates, risks of collaborating with or relying on third parties to discover, develop, manufacture and commercialize products, and risks associated with establishing and maintaining sales, marketing and distribution capabilities with appropriate technical expertise and supporting infrastructure. Other risks affecting Theravance Biopharma are described under the heading "Risk Factors" contained in Theravance Biopharma's Form 10-Q filed with the Securities and Exchange Commission (SEC) on May 9, 2018 and Theravance Biopharma's other filings with the SEC. In addition to the risks described above and in Theravance Biopharma's filings with the SEC, other unknown or unpredictable factors also could affect Theravance Biopharma's results. No forward-looking statements can be guaranteed and actual results may differ materially from such statements. Given these uncertainties, you should not place undue reliance on these forward-looking statements. Theravance Biopharma assumes no obligation to update its forward-looking statements on account of new information, future events or otherwise, except as required by law.

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Contact Information:

Alexander Dobbin
Head of Investor Relations
650-808-4045
investor.relations@theravance.com

(In thousands, except per share data)

	Three Months Ended June 30,		Six Months Ended June 30,	
	2018	2017	2018	2017
	(Unaudited)		(Unaudited)	
Revenue:				
Product sales	\$ 5,361	\$ 3,474	\$ 9,040	\$ 6,524
Revenue from collaborative arrangements	18,115	35	22,755	72
Total revenue	<u>23,476</u>	<u>3,509</u>	<u>31,795</u>	<u>6,596</u>
Costs and expenses:				
Cost of goods sold	(1,448)	1,364	(622)	1,929
Research and development (1)	48,621	42,927	96,386	83,492
Selling, general and administrative (1)	25,007	24,339	49,711	45,125
Total costs and expenses	<u>72,180</u>	<u>68,630</u>	<u>145,475</u>	<u>130,546</u>
Loss from operations	(48,704)	(65,121)	(113,680)	(123,950)
Income from investment in TRC, LLC	1,949	—	2,635	—
Interest expense	(2,137)	(2,137)	(4,274)	(4,274)
Interest and other income	1,284	1,425	2,768	2,455
Loss before income taxes	(47,608)	(65,833)	(112,551)	(125,769)
Provision for income tax (benefit)	(6,790)	454	(6,646)	5,837
Net loss	<u>\$ (40,818)</u>	<u>\$ (66,287)</u>	<u>\$ (105,905)</u>	<u>\$ (131,606)</u>
Net loss per share:				
Basic and diluted net loss per share	<u>\$ (0.76)</u>	<u>\$ (1.27)</u>	<u>\$ (1.98)</u>	<u>\$ (2.53)</u>
Shares used to compute basic and diluted net loss per share	<u>53,799</u>	<u>52,255</u>	<u>53,529</u>	<u>51,938</u>

(1) Amounts include share-based compensation expense as follows:

(In thousands)	Three Months Ended June 30,		Six Months Ended June 30,	
	2018	2017	2018	2017
Research and development	\$ 6,904	\$ 4,917	\$ 13,463	\$ 10,018
Selling, general and administrative	6,951	5,481	14,390	10,649
Total share-based compensation expense	<u>\$ 13,855</u>	<u>\$ 10,398</u>	<u>\$ 27,853</u>	<u>\$ 20,667</u>

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THERAVANCE BIOPHARMA, INC.
CONDENSED CONSOLIDATED BALANCE SHEETS
(In thousands)

	June 30, 2018 (Unaudited)	December 31, 2017 (1)
Assets		
Current assets:		
Cash and cash equivalents and short-term marketable securities	\$ 352,903	\$ 348,566
Receivables from collaborative arrangements	3,865	7,109
Prepaid taxes	944	291
Other prepaid and current assets	11,075	5,953
Inventories	17,906	16,830
Property and equipment, net	10,677	10,157
Long-term marketable securities	18,252	41,587
Tax receivable	3,143	8,191
Restricted cash	833	833
Other assets	1,766	1,883
Total assets	<u>\$ 421,364</u>	<u>\$ 441,400</u>
Liabilities and Shareholders' Equity		
Current liabilities	93,480	62,552
Long-term liabilities	293,497	263,670
Shareholders' equity	34,387	115,178
Total liabilities and shareholders' equity	<u>\$ 421,364</u>	<u>\$ 441,400</u>

(1) The condensed consolidated balance sheet at December 31, 2017 has been derived from the audited consolidated financial statements included in the Company's Annual Report on Form 10-K for the fiscal year ended December 31, 2017.

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Theravance Biopharma, Inc. (NASDAQ: TBPH)

2Q 2018 Financial Results and Business Update
August 1, 2018

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Cautionary Statement Regarding Forward-Looking Statements

Under the safe harbor provisions of the U.S. Private Securities Litigation Reform Act of 1995, the company cautions investors that any forward-looking statements or projections made by the company are subject to risks and uncertainties that may cause actual results to differ materially from the forward-looking statements or projections.

Examples of forward-looking statements in this presentation include statements relating to the company's business plans and objectives, including financial and operating results, potential partnering transactions and sales targets, the company's regulatory strategies and timing and results of clinical studies, the potential benefits and mechanisms of action of the company's product and product candidates (including their potential as components of combination therapies).

The company's forward-looking statements are based on the estimates and assumptions of management as of the date of this presentation and are subject to risks and uncertainties that may cause the actual results to be materially different than those projected, such as risks related to delays or difficulties in commencing or completing clinical studies, the potential that results from clinical or non-clinical studies indicate product candidates are unsafe or ineffective (including when our product candidates are studied in combination with other compounds), delays or failure to achieve and maintain regulatory approvals for product candidates, risks of collaborating with third parties to discover, develop and commercialize products, risks associated with establishing and maintaining sales, marketing and distribution capabilities.

Other risks affecting the company are described under the heading "Risk Factors" and elsewhere in the company's Form 10-Q filed with the Securities and Exchange Commission (SEC) on May 9, 2018, and other periodic reports filed with the SEC.

Portfolio Advancements in 2018



TD-1473 (JAKi)

Partnership with global leader
in Immunology

Global collaboration with Janssen
Biotech in inflammatory intestinal
disease



TD-9855 (NSRI)

Positive top-line four-week
results in nOH

Durable symptom improvements;
clinically meaningful benefit in
standing SBP



YUPELRI™ (LAMA)

NDA accepted by FDA and
under review

Assigned PDUFA date of
November 13, 2018



Economic interest in Trelegy serves as an important strategic asset¹

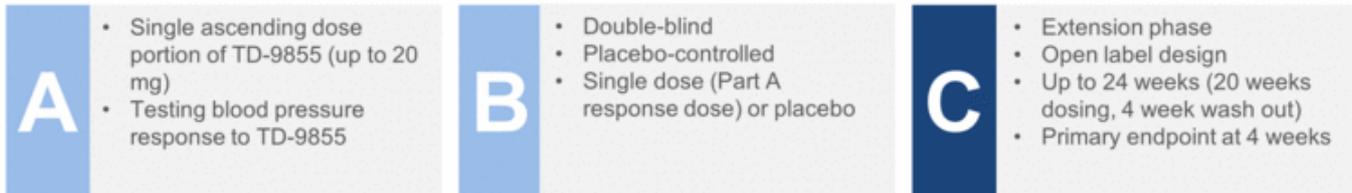
- ✓ Promising initial launch by GSK following approvals in US and EU in late 2017
- ✓ Expanded COPD indication approved by FDA, supported by data from IMPACT study
- ✓ Entitled to upward-tiering royalty of 5.5% - 8.5% of worldwide net sales

3 JAK = Janus kinase, NSRI = norepinephrine serotonin reuptake inhibitor, nOH = neurogenic orthostatic hypotension, SBP = systolic blood pressure, LAMA = long-acting muscarinic antagonist, PDUFA = Prescription Drug User Fee Act. ¹ All statements based on publically available information. Approved in US for the treatment of COPD and for the treatment of appropriate patients with COPD in EU. TBPH holds 85% economic interest in upward tiering royalty stream of 6.5% - 10% payable by GSK

TD-9855: Overview of Phase 2 Study in nOH

Study in patients with neurogenic orthostatic hypotension

Three-part design in patients with nOH:



Patients started on Part A, and responders moved to Part B and/or Part C (extension phase)

Purpose: To evaluate the effect of TD-9855 in improving blood pressure and key nOH symptoms

Part C: Responders in Part A eligible for open-label TD-9855 for up to 5 months

- Designed to assess durability of effect
- Primary assessment at four weeks (Day 29)
- Efficacy evaluations: OHSA¹ #1; standing time duration; standing Systolic Blood Pressure (SBP)
- Also assessed safety and PK of TD-9855

4 ¹ OHSA = Orthostatic Hypotension Symptom Assessment. OHSA #1 measures dizziness (cardinal symptom of nOH), lightheadedness, feeling faint, or feeling of impending black out

TD-9855: Top-line Phase 2 Results in nOH

Parts A and B

A Initial responses observed

Responses reported in majority of patients treated

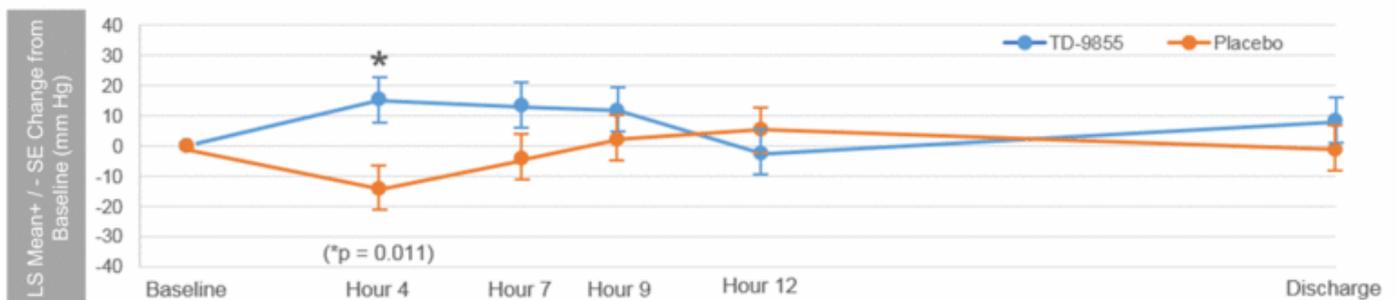
- 27 of 34 patients enrolled in Part A showed improvements in SBP and/or standing time
- Responses observed above 5 mg

B Confirmation vs. placebo

Statistically significant difference of 30 mm Hg at 4 hours post-dose ($p = 0.011$)

- TD-9855 increased SBP from a low baseline
- SBP dropped on placebo during the day as expected, in response to postural changes and eating
- No evidence of supine hypertension with TD-9855 overnight

Part B Change from Baseline SBP



TD-9855: Top-line Phase 2 Results in nOH

Part C (extension phase)

C

Durability of effect observed in repeat dose extension phase

16 of 21 patients (76%) completed four weeks of treatment

Reductions in symptom severity, with most pronounced benefit in patients with symptomatic nOH¹

- Mean reduction in OSHA #1 = 2.4 at four weeks (n=16)
- 13 completers had OSHA #1 \geq 4 at baseline; **mean reduction in group = 3.8 at four weeks**

Consistent increases in SBP through four weeks

- Clinically meaningful increases in standing SBP (7 mm Hg or greater) after standing for three minutes at all time points on all weekly clinic visits

Generally well tolerated; no serious adverse events assessed as drug-related

Positive results across the three-part study, including durability of effect, provide basis to begin registrational Phase 3 program in nOH in late 2018 or early 2019

TD-1473: Encouraging Findings in Phase 1b Study

4-week treatment in 40 patients with ulcerative colitis

Key Findings

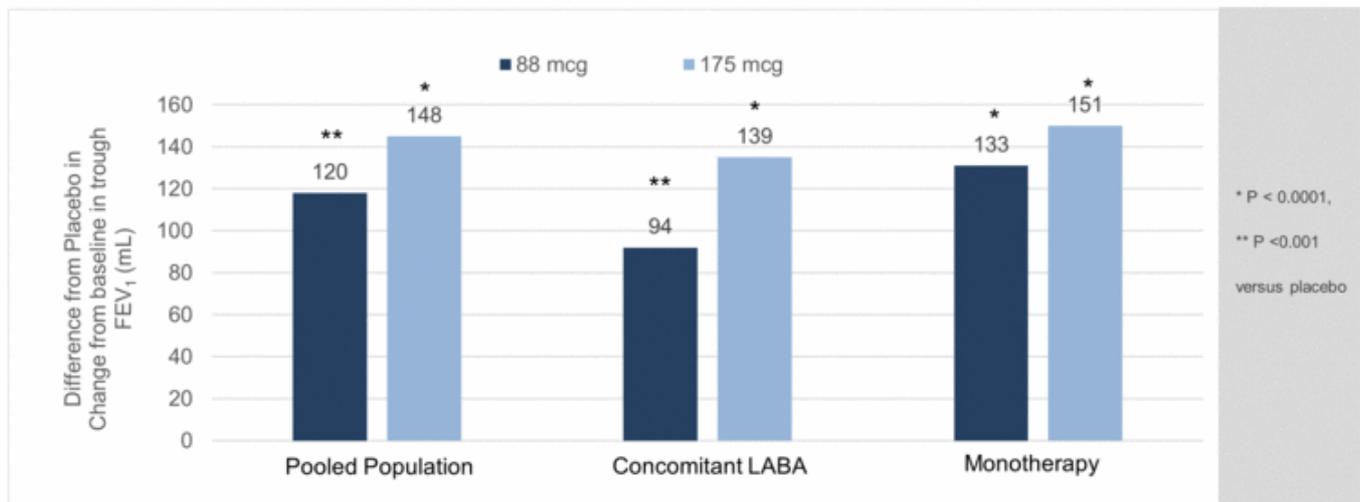
Favorable overall safety and tolerability	No systemic or opportunistic infections (including herpes zoster)
	No evidence of reduce white cell counts
Minimal systemic exposure	Plasma levels of TD-1473 very low
	Consistent in all cohorts to levels observed in healthy volunteers
Biologic activity in GI tract	Rates of clinical response higher for all active doses compared to placebo ¹
	Clinical responses matched by dose-dependent reductions in surrogate biomarkers ²
	Endoscopic improvements and mucosal healing reported in all active arms; none reported in placebo arm
	Rectal bleeding scores improved above placebo at highest two doses
	Dose-related increases in local GI tissue drug concentrations; higher two doses produced mean concentrations above the JAK IC50

Presentation of full results at future medical meeting;
progressing into Phase 2b/3 in UC and Phase 2 in Crohn's disease in 2H 2018

7 ¹ Clinical response as measured by both partial and full Mayo
² Surrogate biomarkers include C-reactive protein (CRP) and fecal calprotectin

YUPELRI™: PDUFA Date November 13, 2018

Potential as first once-daily nebulized LAMA for COPD



- NDA supported by Phase 3 efficacy and safety studies
- Primary endpoint achieved for both doses in replicate efficacy studies
 - ✓ Robust and sustained improvements in FEV₁
 - ✓ Effective as monotherapy and as add-on to LABA or LABA/ICS
- Generally well tolerated in 12-month safety study

2Q 2018 Financial Highlights

	Three Months Ended, June 30,	
	2018	2017
	(\$, in thousands) Unaudited	
Total Revenue	23,476	3,509
Cost of Goods Sold	(1,448)	1,364
Research and Development ¹	48,621	42,927
Selling, General and Administrative ¹	25,007	24,339
Total Costs and Expenses	72,180	68,630
Operating Loss	(48,704)	(65,121)
<i>¹Amounts include share-based compensation expense below</i>		
Research and Development	6,904	4,917
Selling, General and Administrative	6,951	5,481
Total Share-based Compensation Expense	13,855	10,398
Operating Loss excluding Share-based Compensation	(34,849)	(54,723)
Cash, Cash Equivalents and Marketable Securities as of June 30, 2018	371,155	

GSK's Trelegy Ellipta Offers Significant Potential

First and only once-daily single inhaler triple therapy

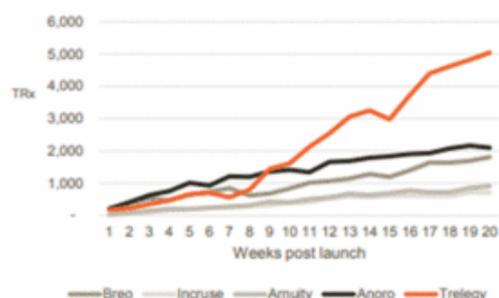
Economic interest in Trelegy Ellipta serves as an important strategic asset

- Upward-tiering royalty 5.5% - 8.5% of worldwide net sales¹
- Passive economic interest; no product cost obligations

Program Summary

- Approved for COPD in US and EU²
- FF/UMEC/VI: Comprise of ICS, LAMA, and LABA, active components of Breo[®] (FF/VI) and Anoro[®] (UMEC/VI)
- Phase 3 CAPTAIN asthma study in progress

Strongest US Ellipta launch to date



Launched in US in November 2017

Source: GSK; IQVIA NPA weekly TRx data



Economic interest in Trelegy serves as an important strategic asset¹

- ✓ Promising initial launch by GSK following approvals in US and EU in late 2017
- ✓ Expanded COPD indication approved by FDA, supported by data from IMPACT study
- ✓ Entitled to upward-tiering royalty of 5.5% - 8.5% of worldwide net sales

10 All statements based on publically available information. Trelegy Ellipta jointly managed by GSK and Innoviva (formerly Theravance, Inc.)¹ TBPH holds 85% economic interest in upward tiering royalty stream of 6.5% - 10% payable by GSK.² Approved in EU for treatment of appropriate patients with COPD. ICS = Inhaled corticosteroids. LABA = long-acting beta2-adrenergic agonist

Focus on Strategic Priorities

Commitment to developing transformational medicines

Opportunities to Create Transformational Medicines	YUPELRI™ (revefenacin)	Nebulized LAMA in COPD (PDUFA date November 13, 2018)
	TD-1473	Intestinally-restricted JAK inhibitor for inflammatory intestinal diseases
	TD-9855	NSRI in symptomatic neurogenic orthostatic hypotension
	TD-8236	Inhaled JAK inhibitor for serious respiratory diseases
	Research	R&D Day to highlight new programs advancing towards clinic

Strategic Asset	Trelegy Ellipta	(FF/UMEC/VI) Single inhaler triple therapy in COPD
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Managed by GSK and Innoviva¹

11 ¹ Economic interest. FF/UMEC/VI= Fluticasone Furoate/Umeclidinium/Vilanterol. Innoviva formerly Theravance, Inc.

Q&A

Thank you



Theravance Biopharma Reports Positive Top-Line Four-Week Data from Phase 2 Trial of TD-9855 for the Treatment of Symptomatic Neurogenic Orthostatic Hypotension

Durable Improvements in nOH Symptom Severity Observed as Measured by OHSA Question #1

Findings Demonstrate Consistent Increases in Systolic Blood Pressure (SBP), Including Clinically Meaningful Improvements in Standing SBP at All Time Points

Company Plans to Progress TD-9855 into Registrational Phase 3 Program

DUBLIN, IRELAND — August 1, 2018 — Theravance Biopharma, Inc. (NASDAQ: TBPH) (“Theravance Biopharma”) today announced positive four-week results from a Phase 2 clinical trial of TD-9855, an investigational, once-daily norepinephrine and serotonin reuptake inhibitor (NSRI) in development for the treatment of patients with symptomatic neurogenic orthostatic hypotension (nOH). Top-line results from the study included durable improvements in patients’ disease symptom severity after four weeks of treatment with TD-9855, as measured by Orthostatic Hypotension Symptom Assessment Question #1 (OHSA #1). OHSA #1 is a measure of dizziness, lightheadedness, or the sensation of being about to black out. Patients treated in the extension phase of the study showed a mean symptom improvement of 2.4 points at four weeks. Importantly, mean symptom improvement was greatest (3.8 points) in nOH patients who reported dizziness symptoms (OHSA #1 \geq 4) at baseline, a pre-defined regulatory and clinical threshold that will be used to enroll patients in Phase 3. Additionally, TD-9855 consistently increased systolic blood pressure (SBP), including clinically meaningful increases in standing SBP at the three-minute assessment at all time points on all weekly clinic visits. There were no drug-related serious adverse events reported, and TD-9855 was generally well tolerated in the study. Theravance Biopharma has also concluded its discussions with the U.S. Food and Drug Administration (FDA) on the design of a pivotal Phase 3 registrational program and plans to initiate the program in late 2018 or early 2019.

“Demonstrating improvements in dizziness, one of the key nOH symptoms, coupled with sustained blood pressure benefits up to four weeks, provide very encouraging evidence of the important impact TD-9855 can have on patients afflicted with the condition,” said Brett Haumann, MD, Chief Medical Officer of Theravance Biopharma. “We believe the durability of effect observed in patients on active therapy may prove to be a differentiating feature for TD-9855, and data collected in this multi-part clinical trial provide us confidence to advance TD-9855 into a pivotal Phase 3 clinical program.”

“Durable and meaningful improvements to symptoms and increased blood pressure in patients with nOH, seen with TD-9855 both acutely and over a period of time, are impressive,” said Horacio Kaufmann, MD, FAAN, Felicia B. Axelrod Professor of Dysautonomia Research in the Department of Neurology and professor of medicine and pediatrics at NYU School of Medicine. “Despite currently available options, there remains a need for scientific advancement in the treatment of nOH, and I expect there will be significant interest in TD-9855 among neurologists and autonomic specialists based on the therapeutic and tolerability profiles which emerged in this Phase 2 study.”

Results from the Multiple-Part Phase 2 Study

Part C (Extension Phase): Mean Reductions in Symptom Severity and Consistent Increases in Systolic Blood Pressure at Four Weeks; Pronounced Benefits in Patients with Symptomatic nOH

- Sixteen of 21 patients enrolled in Part C completed 29 days of treatment. These 16 patients showed a mean reduction of 2.4 points in OHSA #1 at four weeks, with more than 60% showing a reduction \geq 2 points. Thirteen of these 16 Part C completers entered the trial with OHSA #1 of \geq 4 (a threshold that will be applied in the registrational studies). These patients reported a mean OHSA #1 reduction of 3.8 points. Theravance Biopharma intends to focus on patients with similar nOH characteristics in the Phase 3 registrational program.
- In Part C, treatment with TD-9855 led to increased SBP for patients at all visits and all time points measured, including clinically meaningful increases in standing SBP (7 mm Hg or greater) at the three-minute assessment on all time points at all visits.
- The most commonly reported adverse event in Part C was urinary tract infection, known to be a frequent observation in patients with nOH because of impaired bladder function. There were four serious adverse events, and none were assessed as drug-related.

Part A: Responses Reported in Majority of Patients Treated

- Of 34 patients enrolled in Part A, 27 patients showed improvements in either blood pressure and/or standing time. For these 27 patients, improvements in standing time compared to baseline at 10 hours were observed following treatment with TD-9855, suggesting potential benefit for patients with symptomatic nOH. This part of the study suggested that clinical benefit occurred at doses above 5 mg.

Part B: Statistically Significant Improvement in Blood Pressure from Seated to Standing

- In the placebo-controlled Part B, a statistically significant difference of 30 mm Hg ($p = 0.011$) was observed in standing SBP between the active and placebo arms at the four-hour post-dose time point, and the increase in blood pressure was maintained above baseline through the nine-hour time point. These patients had a lower than normal mean SBP at baseline, consistent with nOH.

Theravance Biopharma intends to present full results at a future medical meeting.

About the Phase 2 Study in nOH

These top-line data were generated in a Phase 2 study of TD-9855 in neurogenic orthostatic hypotension (nOH) which consists of three parts. Part A is a single ascending dose (from 1 mg up to 20 mg based on patient response) designed to evaluate impact on blood pressure and standing time for TD-9855 as compared to placebo. Part B is a double-blind, single dose study designed to

evaluate impact on blood pressure and standing time for TD-9855 as compared to placebo. Part B was discontinued when the trial was amended to include Part C, following the enrollment of ten patients in Part B (five on TD-9855; five on placebo). Part C is an open label extension to Part A designed to evaluate improvement in patients' symptoms and impact on blood pressure. Responders in Part A were eligible to enroll in Part C at up to their highest tolerated Part A dose, which included 5 mg, 10 mg and 20 mg. The primary endpoint of the study was measured after four weeks, although patients can continue to receive medication for up to five months.

About nOH

Neurogenic orthostatic hypotension (nOH) is a rare disorder defined as a sustained orthostatic fall in systolic blood pressure (SBP) of ≥ 20 mm Hg or diastolic blood pressure (DBP) of ≥ 10 mm Hg within three minutes of standing. Severely affected patients are unable to stand for more than a few seconds because of their decrease in blood pressure, leading to cerebral hypoperfusion and syncope. A debilitating condition, nOH results in a range of symptoms including dizziness, lightheadedness, fainting, fatigue, blurry vision, weakness, trouble concentration and head and neck pain. nOH is caused by autonomic nervous system (ANS) malfunction and is associated with several underlying medical conditions including multiple system atrophy (MSA), pure autonomic failure (PAF) and Parkinson's disease (PD).

OHSA#1 is an end-point which is part of the Orthostatic Hypotension Questionnaire, a validated scale assessing the presence of a range of hypotension-related symptoms including dizziness, weakness, problems with vision, fatigue, trouble concentrating and head/neck discomfort. It is based on a scale from 0 (no symptoms) to 10 (worst possible severity of a symptom), with reductions in OHSA points indicating symptom improvement and increases in OHSA score indicating symptom worsening. OHSA #1 specifically measures patients' dizziness, lightheadedness, feeling faint, or feeling like they might black out. OHSA#1 has been accepted as a suitable endpoint in the investigation of neurogenic orthostatic hypotension by regulatory agencies.

About TD-9855

TD-9855 is an investigational, once-daily norepinephrine and serotonin reuptake inhibitor (NSRI) being developed for the treatment of patients with symptomatic neurogenic orthostatic hypotension (nOH). The compound has high affinity for binding to norepinephrine and serotonin transporters. By blocking the action of these transporters, TD-9855 causes an increase in extracellular concentrations of norepinephrine and serotonin. The compound is the focus of an ongoing Phase 2 clinical trial, with plans for the initiation of a Phase 3 registrational study in patients with symptomatic nOH planned by the end of 2018.

About Theravance Biopharma

Theravance Biopharma, Inc. ("Theravance Biopharma") is a diversified biopharmaceutical company with the core purpose of creating medicines that help improve the lives of patients suffering from serious illness.

In our relentless pursuit of this objective, we strive to apply insight and innovation at each stage of our business, including research, development and commercialization, and utilize both internal capabilities and those of partners around the world. Our research efforts are focused in the areas of inflammation and immunology. Our research goal is to design localized medicines that target diseased tissues, without systemic exposure, in order to maximize patient benefit and minimize risk. These efforts leverage years of experience in developing localized medicines for the lungs to treat respiratory disease. The first potential medicine to emerge from our research focus on immunology and localized treatments is an oral, intestinally restricted pan-Janus kinase (JAK) inhibitor, currently in development to treat a range of inflammatory intestinal diseases. Our pipeline of internally discovered product candidates will continue to evolve with the goal of creating transformational medicines to address the significant needs of patients.

In addition, we have an economic interest in future payments that may be made by Glaxo Group or one of its affiliates (GSK) pursuant to its agreements with Innoviva, Inc. relating to certain programs, including Trelegy Ellipta.

For more information, please visit www.theravance.com.

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This press release contains certain "forward-looking" statements as that term is defined in the Private Securities Litigation Reform Act of 1995 regarding, among other things, statements relating to goals, plans, objectives, expectations and future events. Theravance Biopharma intends such forward-looking statements to be covered by the safe harbor provisions for forward-looking statements contained in Section 21E of the Securities Exchange Act of 1934 and the Private Securities Litigation Reform Act of 1995. Examples of such statements include statements relating to: the Company's strategies, plans and objectives, the Company's regulatory strategies and timing of clinical studies (including the data therefrom), the potential benefits and mechanisms of action of the Company's product and product candidates, the Company's expectations for product candidates through development, potential regulatory approval and commercialization (including their potential as components of combination therapies), product sales and the Company's expectations for its 2018 operating loss, excluding share-based compensation. These statements are based on the current estimates and assumptions of the management of Theravance Biopharma as of the date of the press release and the conference call and are subject to risks, uncertainties, changes in circumstances, assumptions and other factors that may cause the actual results of Theravance Biopharma to be materially different from those reflected in the forward-looking statements. Important factors that could cause actual results to differ materially from those indicated by such forward-looking statements include, among others, risks related to: delays or difficulties in commencing, enrolling or completing clinical studies, the potential that results from clinical or non-clinical studies indicate the Company's product candidates are unsafe or ineffective (including when our product candidates are studied in combination with other compounds), risks that product candidates do not obtain approval from regulatory authorities, the feasibility of undertaking future clinical trials for our product candidates based on policies and feedback from regulatory authorities, dependence on third parties to conduct clinical studies, delays or failure to achieve and maintain regulatory approvals for product candidates, risks of collaborating with or relying on third parties to discover, develop, manufacture

and commercialize products, and risks associated with establishing and maintaining sales, marketing and distribution capabilities with appropriate technical expertise and supporting infrastructure. Other risks affecting

Theravance Biopharma are described under the heading “Risk Factors” contained in Theravance Biopharma’s Form 10-Q filed with the Securities and Exchange Commission (SEC) on May 9, 2018 and Theravance Biopharma’s other filings with the SEC. In addition to the risks described above and in Theravance Biopharma’s filings with the SEC, other unknown or unpredictable factors also could affect Theravance Biopharma’s results. No forward-looking statements can be guaranteed and actual results may differ materially from such statements. Given these uncertainties, you should not place undue reliance on these forward-looking statements. Theravance Biopharma assumes no obligation to update its forward-looking statements on account of new information, future events or otherwise, except as required by law.

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